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CAM	PAIGN CONTRIBUTIONS AND EXPENSES RE	PORT	9	State of Nevada
Name	(print) Office (if appl	icable)	D	istrict (if applicable)
Mailing	g Address (include city and zip code)		Telephone No.	
E-Mail	Address			
Select	Appropriate Box(es) CANDIDATE PAC PC	DL PRTY IND EXP NO	NPROFIT CORP	
	☐ LEGAL DEFENSE FUND ☐ AF	MENDED		
	Annual Filing - Due January 15, 2008 Period: January 1, 2007 – December 31, 2007			
P	Report #1 — Due August 5, 2008* Period: Jan. 1, 2008 — July 31, 2008			
	Report #2 Due — October 28, 2008* Period: Aug. 1, 2008 — Oct. 23, 2008			
	Report #3 Due — January 15, 2009*/** Period: Oct. 24, 2008 — Dec. 31, 2008			AS TRA
	Annual Filing – Due January 15, 2009 Period: January 1, 2008 – December 31, 2008		FOR OF	FICE USE ONLY
. *	These Reports are filed by incumbents/candidate * Third Report suffices for 2009 Annual Filing if ca	es running for office in the a	2008 election cy os. 1 and 2	177
	CONTRIBUTIONS SUMMARY			From Beginning of Report Period #1
	CONTRIBUTIONS SUMMARY		This Period	through End of This Reporting Period
	Total Monetary Contributions Received in Excess of \$100     (See page 1 of instruction sheet)			6
	Total Monetary Contributions Received of \$100 or Less     (See page 2 of instruction sheet)			0
	Total Monetary Contributions in the form of loans guaranteed party. (See page 2 of instruction sheet)	d by a third		0
	Total Monetary Contributions in the form of loans that were for (See page 2 of instruction sheet)	orgiven  Cumulative From		0
	Thi	s Period Beginning of Report Period #1 Through End of This Reporting Period		
	5. Total Amount of Monetary Contributions Received			
	(Add Lines 1 through 4) (See page 2 of instruction sheet) 6. Total Amount of Written Commitments for Contributions (When commitment is funded, report as			
	contribution (monetary or in kind)) (See page 2 of instruction sheet) 7. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)			
	EXPE	NSES SUMMARY		
	Total Monetary Expenses Paid in Excess of \$100     (See page 2 of instruction sheet)			10
	Total Monetary Expenses Paid of \$100 or Less			0
	(See page 2 of instruction sheet)  10. Total Amount of All Monetary Expenses Paid			10
	(Add Lines 8 and 9) (See page 2 of instruction sheet)  11. Total Value of In Kind Expenses in Excess	10		110
	of \$100 (See page 3 of instruction sheet)			
	12. Disposition of Unspent Contributions (Only reported on Report #3, Annual Report or 15th day of the second month after candidates defeat or			
	incumbent does not run for reelection) (See page 3 of instruction sheet)	0		
		FIRMATION		
0	Declare Under Penalty of Perjury That the Forego	oing is True and Correct.	_ ,	
D	1 Soo Med So		5/1	6/08
Signal	ure )/		Date	,
EL201	.doc Revised: Dec-07		PAGE	OF

Office (if applicable)

District (if applicable)

# Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 <sup>RD</sup> PARTY IF LOAN GUARANTEED BY 3 <sup>RD</sup> PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR

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Office (if applicable)

District (if applicable)

Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT

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Office (if applicable)

District (if applicable)

## **Expense Categories**

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	н
** Goods and services provided in kind for which money would otherwise have been paid	ı
Other miscellaneous expenses	J

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<sup>\*\*</sup> NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

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Name (print)

Office (if applicable)

District (if applicable)

# Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE

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#### IN KIND CONTRIBUTIONS AND EXPENSES REPORT

## IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

**Examples of in kind contributions:** (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

**Example of in kind expenses:** (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

Office (if applicable)

District (if applicable)

## IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 7 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 <sup>RD</sup> PARTY IF LOAN GUARANTEED BY 3 <sup>RD</sup> PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THI LOAN

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Office (if applicable)

District (if applicable)

In Kind Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT	DATE OF EACH IN KIND COMMITMENT	AMOUNT OF EACH IN KIND COMMITMENT

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Name (print)

Office (if applicable)

District (if applicable)

## IN KIND

# Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 11 of Expenses Summary

NAME AND ADDRESS OF			
PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE

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Prescribed by Secretary of State NRS 294A.120, 294A.125, 294A.140, 294A.150, 294A.160 294A.200, 294A.210, 294A.220, 294A.362

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